IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : McGRATH, Mark John *et al.*

Appl. No. : 10/006,425

Filed : December 6, 2001

Title : VIDEO INFORMATION RETRIEVAL

Art Unit : 2171

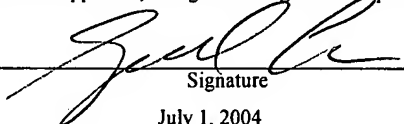Examiner : NGUYEN, Merilyn P.

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JUL 1 2 2004

Technology Center 2100

745 Fifth Avenue
New York, NY 10151

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

_____Samuel S. Lee, Reg. No. 42,791_____
(Name of Applicant, Assignee or Registered Representative)

_____
Signature

_____July 1, 2004_____
Date of Signature

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of April 23, 2004, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2.

Amendments to the Claims are reflected in the listing of claims, which begins on page 3.

Remarks/Arguments begin on page 9.

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PATENT
450110-03713

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)   :   Mark John McGRATH et al.

Serial No.   :   10/006,425

For   :   **VIDEO INFORMATION RETRIEVAL**

Filed   :   December 6, 2001

Examiner   :   NGUYEN, Merilyn P.

Art Unit   :   2171

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Technology Center 2100

MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS
Alexandria, VA 22313-1450
Sir:

Transmitted herewith is an amendment in the above-identified application.

☐   No additional fee is required.

☒   The fee has been calculated as shown below.

☐   This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	19	Minus	20 =	0 ×	$18(9)	= $0
Independent claims	7	Minus	4 =	3 ×	$86(43)	= $258.00
			Total additional fee for this amendment			= $258.00

*   If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

**   If the highest number of total claims previously paid for is less than 20, write "20" in this space.

***   If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

☐   This application contains a multiple dependent claim. The required fee of $290 ($145) has been previously paid ☐, or is paid herewith ☐.

☐   This response is being filed within the ____ month following the expiration of the term originally set therefor.
       This is a petition to request a __-**month** extension of time. A check covering the cost of the petition is enclosed.

☒   A check in the amount of **$ 258.00** is attached, which covers the cost of
       ☒ additional claims and ☐ -month petition for extension of time.

☐   Charge $_ to Deposit Account No. 50-0320.

☒   Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Samuel S. Lee, Reg. No. 42,791
(Name of Applicant, Assignee or Registered Representative)

_____
Signature

July 1, 2004
Date of Signature

FROMMER LAWRENCE & HAUG, LLP
Attorneys for Applicant(s)

Samuel S. Lee, Reg. No. 42,791 for
By: William S. Frommer
Reg. No 25,506
Tel. (212) 588-0800

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